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AUG 1 6 2004

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TO:

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Alexandria, VA 22313-1450

ATTENTION:

Examiner: Baxter, Jessica R. Group Art Unit: 3731

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FROM:

Ursula B. Day, Reg. No.: 47,296

APPL, NO.

09/935.869

FILED:

August 23, 2001

DOCKET NO:

ARUMI

TYPE OF PAPER: RESPONSE TO OFFICIAL ACTION, dated May 14, 2004

DATE:

August 16, 2004

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MESSAGE:

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CERTIFICATION OF FACSIMILE TRANSMISSION

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No.: ARUMI

In re Request for Continued Examination

in PATENT Application of:

JOSÉ GARCIA ARUMI ET AL

) Examiner: Jessica R. Baxter

Appl. No.: 09/935,869

Group Art Unit: 3731

Filed: August 23, 2001

For: MICRO SURGICAL INSTRUMENT

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RESPONSE TO OFFICE ACTION Dated May 14, 2004

MAIL STOP/FEE AMENDMENTS Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

SIR:

This communication is in response to the Official Action of May 14, 2004 having a shortened period for response expiring August 14, 2004. Since the expiration day fell on a Saturday, a response on the next business day, which is August 16, 2004, is proper.

The Commissioner is hereby also authorized to charge any fees which may be required during the pendency of this application, including any patent application processing fees under 37 C.F.R. 1.17, and any filing fees under

Docket No.: ARUMI Serial No.: 09/935,869

37 C.F.R. 1.16, including presentation of extra claims, or credit any overpayment to Deposit Account No: 06-0502.

- [] Accompanying this amendment is the appropriate fee of \$ pursuant to 37 C.F.R. §1.17(c) and 37 C.F.R. §1.136(a).
- [X] The Commissioner is hereby authorized to charge the appropriate fee of \$86.00 pursuant to 37 C.F.R. §1.17(c) and 37 C.F.R. §1.136(a) for one additional independent claim and any additional fees which may be required, or credit any overpayment to Deposit Account No. 06-0502.
- [X] The Commissioner is hereby also authorized to charge any fees which may be required during the pendency of this application, including any patent application processing fees under 37 C.F.R. 1.17, and any filing fees under 37 C.F.R. 1.16, including presentation of extra claims, or credit any overpayment to Deposit Account No: 06-0502.

Please amend the above-entitled application as follows: